

# Information about Continuing Education Credit for Immunization Update 1999 Course Number VC0025

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Continuing Medical Education (CME) credit, Continuing Nursing Education (CNE) credit, and Continuing Education Units (CEU) are available for this program. Immunization Update 1999 has been approved for 2.0 hours of category 1 CME, 0.2 CEU credits, and 2.4 hours of CNE.

The content of this tape is time-sensitive. Continuing Education Credit availability for ***Immunization Update 1999*** (VC0025) will expire on October 1, 2000. We must receive your optical scan forms on or before this date or you will not receive Continuing Education Credit for this program.

If you do not have a copy of the course evaluation questionnaire and exam, you may find it on the PHTN website <http://www.cdc.gov/phtn/catalog/immup99.htm>. You may photocopy the course evaluation questionnaire and exam. There is no limit to the number of persons who may receive continuing education credit for viewing this program, but each individual must register using the following instructions.

To receive continuing education credit, you must:

- Enroll with CDC for course number **VC0025**
- Complete and return to CDC the two optical scan forms.

How to enroll for this course:

- Call (800) 41-TRAIN (800-418-7246) and at the prompts press 1, then 3. Leave your name and address and request course enrollment materials for course number **VC0025** or you may visit the PHTN website at <http://www.cdc.gov/phtn/catalog/immup99.htm> and request by e-mail course enrollment materials. You should receive your course enrollment materials in the mail within 2 weeks.
- You will receive an instruction sheet, two optical scan forms, and a return envelope. You must mail the original optical scan forms to CDC. No photocopies or faxes will be accepted.

After you enroll for this course:

- You will receive a continuing education award letter in 4 to 6 weeks. Whether you wish to receive course credit or not, we encourage you to share your opinions with us about this course by completing the evaluation questionnaire.

# VC0025 Immunization Update 1999

## Evaluation Questionnaire and Exam

**Goal:** To improve immunization practices in the United States.

**Objectives:** After the viewing this videotape, participants will be able to:

- C Describe current recommendations for polio vaccination in the U.S.
- C List new recommendations for the use of hepatitis A vaccine.
- C Describe two recent vaccine safety issues.

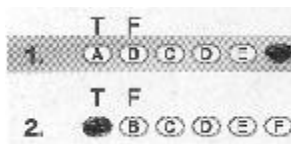
**N Use the red CDC Answer Sheet to complete the following questions.**

**Completely blacken the circle on the optical scan form that corresponds to your answer.**

### ***Tell us about yourself...***

Please note: Questions 2 is a continuation of question 1. Please answer each question, but choose only ONE profession. Your answer to one of these questions will be F. None of the above

Example: If you are a health educator your answer sheet should look like this K



**1. Which of the following best describes your profession?**

- A. Physician
- B. Physician assistant
- C. Nurse practitioner
- D. Nurse
- E. Epidemiologist
- F. None of the above

**2. Which of the following best describes your profession?**

- A. Health educator
- B. Administrator
- C. Laboratorian
- D. Pharmacist
- E. Student
- F. None of the above

**3. Which of the following best describes your work setting?**

- A. Academic
- B. Hospital/medical center
- C. Managed care practice
- D. Private office practice
- E. Public Health
- F. Other work setting

**4. Which of the following best describes the organization in which you work?**

- A. Federal government
- B. State health department
- C. Local health department
- D. Other organization
- E. Do not work in an organization

**5. What kind of credit do you wish to receive?**

- A. CME (Continuing Medical Education)
- B. CNE (Continuing Nursing Education)
- C. CEU (Continuing Education Unit)
- D. APhA/ACPE (**not available for this program**)
- E. Not viewing this program for credit

**6. How did you first learn about this self study program?**

- A. State publication
- B. From a colleague
- C. CDC Internet site or homepage
- D. Public Health Foundation catalog or marketing
- E. PHTN satellite broadcast
- F. Other marketing materials



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7. **What was the most important factor in your decision to participate in this self-study program?**
  - A. Content
  - B. Continuing education credit
  - C. Supervisor recommended
  - D. Previous experience with CDC self-study material
  - E. Convenience of self-study format
  - F. Other
8. **How much time did you spend viewing this videotape and completing the evaluation and exam?**
  - A. Less than 2 hours
  - B. 2.0 -2.5 hours
  - C. >2.5 - 3 hours
  - D. More than 3 hours

**Please use the scale below to rate your agreement with the following statements about this broadcast:**

- A. Agree
  - B. No opinion
  - C. Disagree
  - D. Not applicable
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9. **The objectives are relevant to the goal.**
  10. **I will recommend this self-study program to my colleagues.**
  11. **Participation in this self-study program enhanced my professional effectiveness.**
  12. **The level of technical information met my needs.**
  13. **I am confident I can describe current recommendations for polio vaccination in the U.S.**
  14. **I am confident I can list new recommendations for the use of hepatitis A vaccine.**
  15. **I am confident I can describe two recent vaccine safety issues.**
  16. **I am confident I can discuss up-to-the-minute immunization information.**
  17. **Dr. Atkinson demonstrated expertise in the subject matter.**
  18. **Dr. Humiston demonstrated expertise in the subject matter.**
  19. **The graphics, illustrations, animations and videotaped segments helped me to understand the content.**

20. **The time allocated for the program was appropriate.**
21. **Overall, this self-study program enhanced my ability to understand the content.**
22. **Ordering the videotape from the Public Health Foundation was user-friendly.**
23. **Ordering the course enrollment materials from (800) 41-TRAIN was user-friendly.**
24. **Obtaining the course evaluation and exam from the PHTN web site was user-friendly.**

## ***Exam Questions***

**Questions 25 - 29 are the exam questions. There is only one correct answer for each question.**

25. **Beginning in January 2000, which of the following will be the recommended routine polio vaccination schedule in the U.S.?**
  - A. Four doses of oral polio vaccine (OPV)
  - B. Four doses of inactivated polio vaccine (IPV)
  - C. Three doses of IPV followed by one dose of OPV
  - D. Two doses of OPV followed by two doses of IPV
  - E. Two doses of IPV followed by two doses of OPV
26. **Which of the following persons should routinely receive hepatitis A vaccine?**
  - A. Travelers to developing countries
  - B. Persons who use illegal drugs
  - C. Persons with chronic liver disease
  - D. Children  $\geq 2$  years of age who live in states or communities with persistently elevated hepatitis A rates
  - E. All of the above persons should routinely receive hepatitis A vaccine
27. **What age group should be the highest priority for receipt of preservative-free hepatitis B vaccine?**
  - A. Infants less than 6 months of age
  - B. Children 1-5 years of age
  - C. Adolescents
  - D. Adults 20 years of age and older
  - E. Health care workers of any age

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28. What is the active ingredient in thimerosal ?
- A. Aluminum
  - B. Copper
  - C. Ethyl alcohol
  - D. Mercury
  - E. Formalin
29. Which of the following is NOT a contraindication to receiving varicella vaccine?
- A. Humoral immunodeficiency
  - B. Pregnancy
  - C. Cellular immunodeficiency
  - D. Severe allergic reaction to a prior dose of varicella vaccine
  - E. All the above are contraindications to receiving varicella vaccine

***Thank you for participating in this program.***

**We welcome your questions and comments.**

**Contact the National Immunization Program by Email at [nipinfo@cdc.gov](mailto:nipinfo@cdc.gov)**

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**IMPORTANT!**

**Vaccine recommendations change frequently. Be sure you have the most current recommendations. Updated recommendations are available on the NIP website at <http://www.cdc.gov/nip>.**

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Answer guide for questions 24-28  
25. B, 26. E, 27. A, 28. D, 29. A